

UNITED STATES BANKRUPTCY COURT

Southern DISTRICT OF New York

In Re. Joseph Klaynberg

§
§
§
§

Case No. 22-10165

Debtor(s)

☐ Jointly Administered

Monthly Operating Report

Chapter 11

Reporting Period Ended: 05/31/2022

Petition Date: 02/11/2022

Months Pending: 4

Industry Classification:

0	0	0	0
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Reporting Method: Accrual Basis ☒

Cash Basis ☐

Debtor's Full-Time Employees (current):

0

Debtor's Full-Time Employees (as of date of order for relief):

0

Supporting Documentation (check all that are attached):

(For jointly administered debtors, any required schedules must be provided on a non-consolidated basis for each debtor)

- ☐ Statement of cash receipts and disbursements
- ☐ Balance sheet containing the summary and detail of the assets, liabilities and equity (net worth) or deficit
- ☐ Statement of operations (profit or loss statement)
- ☐ Accounts receivable aging
- ☐ Postpetition liabilities aging
- ☐ Statement of capital assets
- ☒ Schedule of payments to professionals
- ☐ Schedule of payments to insiders
- ☒ All bank statements and bank reconciliations for the reporting period
- ☐ Description of the assets sold or transferred and the terms of the sale or transfer

Joseph Klaynberg

Signature of Responsible Party

06/09/2022

Date

Joseph Klaynberg

Printed Name of Responsible Party

114 Mulberry Street Apt 703

New York, NY 10013

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

Part 1: Cash Receipts and Disbursements	Current Month	Cumulative
a. Cash balance beginning of month	\$455,549	
b. Total receipts (net of transfers between accounts)	\$6,040	\$45,877
c. Total disbursements (net of transfers between accounts)	\$3,105	\$19,462
d. Cash balance end of month (a+b-c)	\$458,484	
e. Disbursements made by third party for the benefit of the estate	\$3,900	\$11,400
f. Total disbursements for quarterly fee calculation (c+e)	\$7,005	\$30,862

Part 2: Asset and Liability Status (Not generally applicable to Individual Debtors. See Instructions.)	Current Month
a. Accounts receivable (total net of allowance)	\$0
b. Accounts receivable over 90 days outstanding (net of allowance)	\$0
c. Inventory (Book <input type="checkbox"/> Market <input type="checkbox"/> Other <input checked="" type="checkbox"/> (attach explanation))	\$0
d. Total current assets	\$0
e. Total assets	\$0
f. Postpetition payables (excluding taxes)	\$0
g. Postpetition payables past due (excluding taxes)	\$0
h. Postpetition taxes payable	\$0
i. Postpetition taxes past due	\$0
j. Total postpetition debt (f+h)	\$0
k. Prepetition secured debt	\$0
l. Prepetition priority debt	\$0
m. Prepetition unsecured debt	\$0
n. Total liabilities (debt) (j+k+l+m)	\$0
o. Ending equity/net worth (e-n)	\$0

Part 3: Assets Sold or Transferred	Current Month	Cumulative
a. Total cash sales price for assets sold/transferred outside the ordinary course of business	\$0	\$0
b. Total payments to third parties incident to assets being sold/transferred outside the ordinary course of business	\$0	\$0
c. Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$0	\$0

Part 4: Income Statement (Statement of Operations) (Not generally applicable to Individual Debtors. See Instructions.)	Current Month	Cumulative
a. Gross income/sales (net of returns and allowances)	\$0	
b. Cost of goods sold (inclusive of depreciation, if applicable)	\$0	
c. Gross profit (a-b)	\$0	
d. Selling expenses	\$0	
e. General and administrative expenses	\$0	
f. Other expenses	\$0	
g. Depreciation and/or amortization (not included in 4b)	\$0	
h. Interest	\$0	
i. Taxes (local, state, and federal)	\$0	
j. Reorganization items	\$0	
k. Profit (loss)	\$0	\$0

Part 5: Professional Fees and Expenses

a.			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
	Debtor's professional fees & expenses (bankruptcy) <i>Aggregate Total</i>		\$0	\$0	\$2,200	\$34,050
	<i>Itemized Breakdown by Firm</i>					
	Firm Name	Role				
i	Cullen and Dykman LLP	Lead Counsel	\$0	\$0	\$0	\$24,161
ii	Thaler Law Firm	Special Counsel	\$0	\$0	\$2,200	\$8,194
iii	Lehman Flynn Vollaro CPA's P	Financial Professional	\$0	\$0	\$0	\$1,695
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b.			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
	Debtor's professional fees & expenses (nonbankruptcy) <i>Aggregate Total</i>		\$0	\$0	\$0	\$0
	<i>Itemized Breakdown by Firm</i>					
	Firm Name	Role				
i			\$0	\$0	\$0	\$0
ii						
iii						
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c.	All professional fees and expenses (debtor & committees)			\$0	\$0	\$2,200	\$34,050

Part 6: Postpetition Taxes**Current Month****Cumulative**

a.	Postpetition income taxes accrued (local, state, and federal)	\$0	\$0
b.	Postpetition income taxes paid (local, state, and federal)	\$0	\$0
c.	Postpetition employer payroll taxes accrued	\$0	\$0
d.	Postpetition employer payroll taxes paid	\$0	\$0
e.	Postpetition property taxes paid	\$0	\$0
f.	Postpetition other taxes accrued (local, state, and federal)	\$0	\$0
g.	Postpetition other taxes paid (local, state, and federal)	\$0	\$0

Part 7: Questionnaire - During this reporting period:

- a. Were any payments made on prepetition debt? (if yes, see Instructions) Yes ☐ No ☒
- b. Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions) Yes ☐ No ☒
- c. Were any payments made to or on behalf of insiders? Yes ☐ No ☒
- d. Are you current on postpetition tax return filings? Yes ☒ No ☐
- e. Are you current on postpetition estimated tax payments? Yes ☒ No ☐
- f. Were all trust fund taxes remitted on a current basis? Yes ☒ No ☐
- g. Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions) Yes ☐ No ☒
- h. Were all payments made to or on behalf of professionals approved by the court? Yes ☒ No ☐ N/A ☐
- i. Do you have:
- Worker's compensation insurance? Yes ☐ No ☒
 - If yes, are your premiums current? Yes ☐ No ☐ N/A ☒ (if no, see Instructions)
 - Casualty/property insurance? Yes ☒ No ☐
 - If yes, are your premiums current? Yes ☒ No ☐ N/A ☐ (if no, see Instructions)
 - General liability insurance? Yes ☐ No ☒
 - If yes, are your premiums current? Yes ☐ No ☐ N/A ☒ (if no, see Instructions)
- j. Has a plan of reorganization been filed with the court? Yes ☐ No ☒
- k. Has a disclosure statement been filed with the court? Yes ☐ No ☒
- l. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes ☒ No ☐

Part 8: Individual Chapter 11 Debtors (Only)

- | | |
|--|---------|
| a. Gross income (receipts) from salary and wages | \$0 |
| b. Gross income (receipts) from self-employment | \$0 |
| c. Gross income from all other sources | \$6,040 |
| d. Total income in the reporting period (a+b+c) | \$6,040 |
| e. Payroll deductions | \$0 |
| f. Self-employment related expenses | \$0 |
| g. Living expenses | \$3,105 |
| h. All other expenses | \$0 |
| i. Total expenses in the reporting period (e+f+g+h) | \$3,105 |
| j. Difference between total income and total expenses (d-i) | \$2,935 |
| k. List the total amount of all postpetition debts that are past due | \$0 |
| l. Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)? Yes <input type="radio"/> No <input checked="" type="radio"/> | |
| m. If yes, have you made all Domestic Support Obligation payments? Yes <input type="radio"/> No <input type="radio"/> N/A <input checked="" type="radio"/> | |

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.

Joseph Klaynberg

Signature of Responsible Party

Debtor

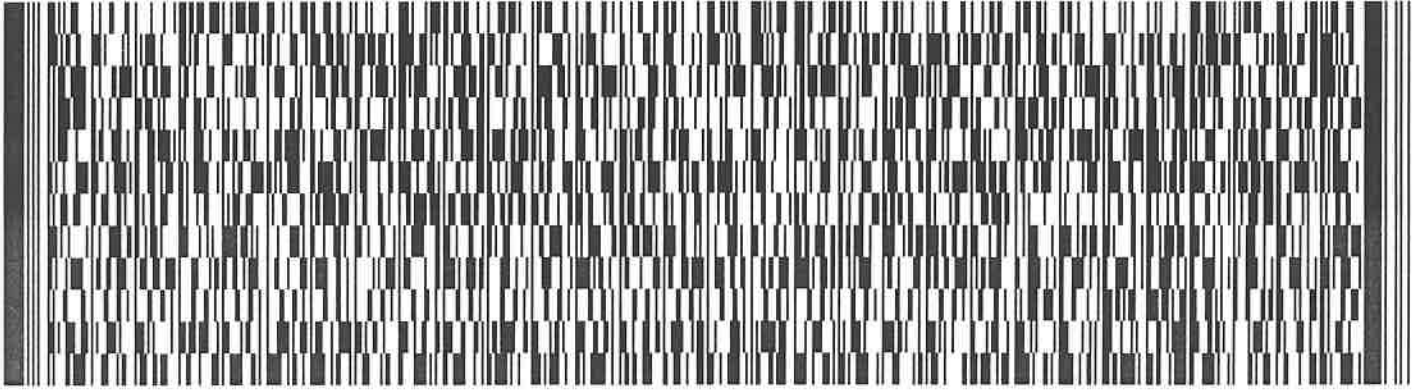
Title

Joseph Klaynberg

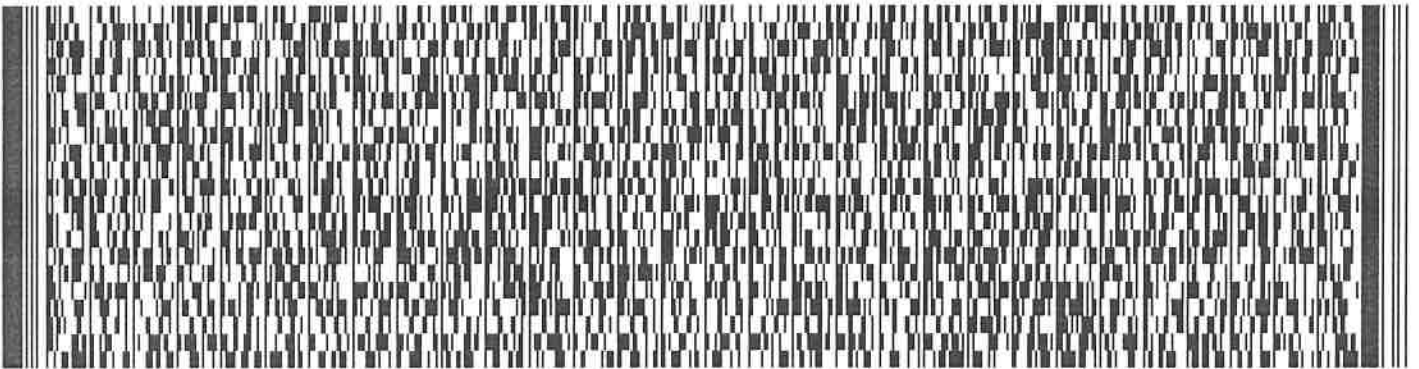
Printed Name of Responsible Party

06/09/2022

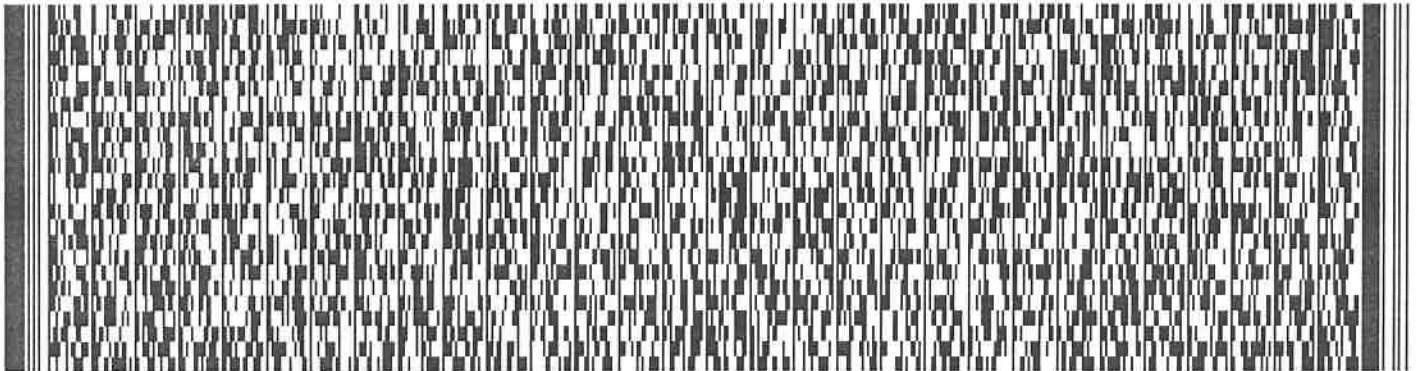
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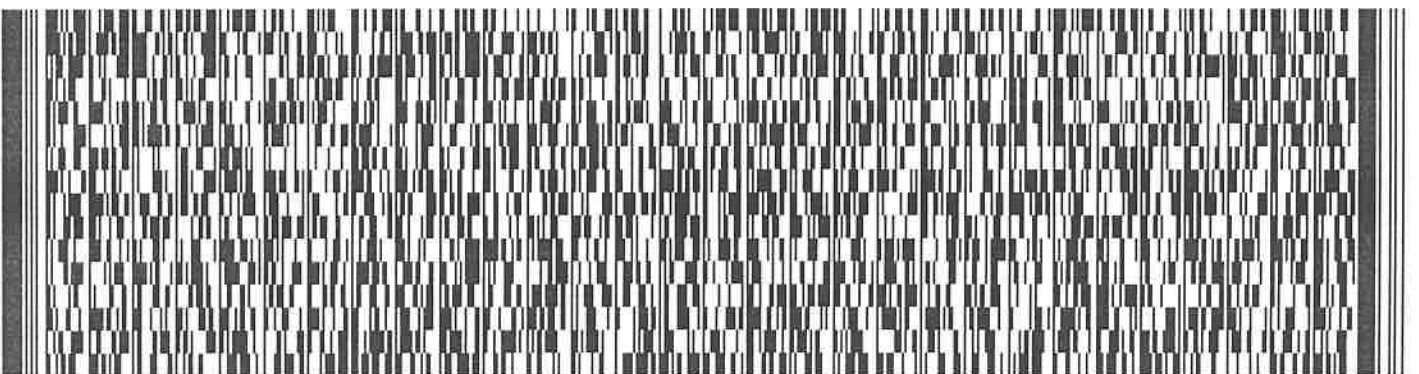
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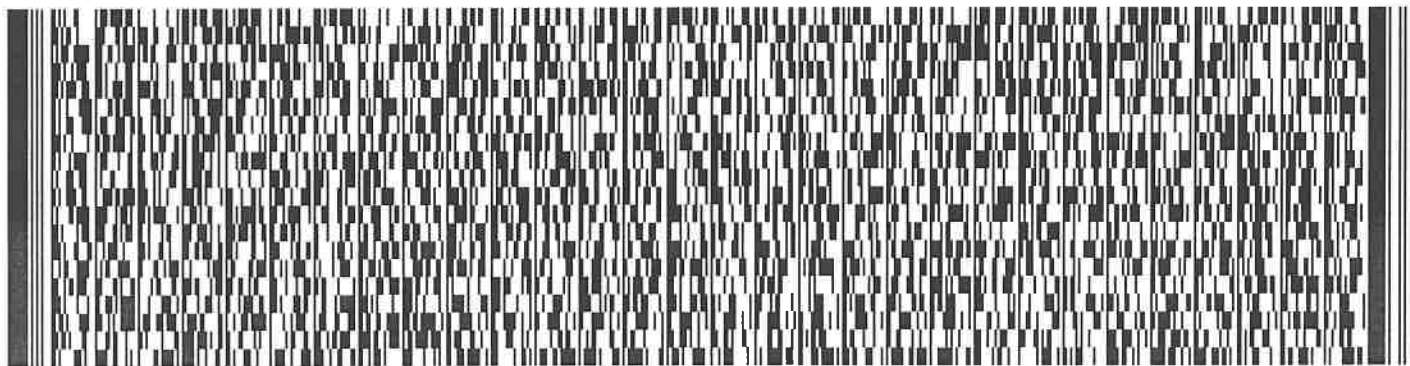
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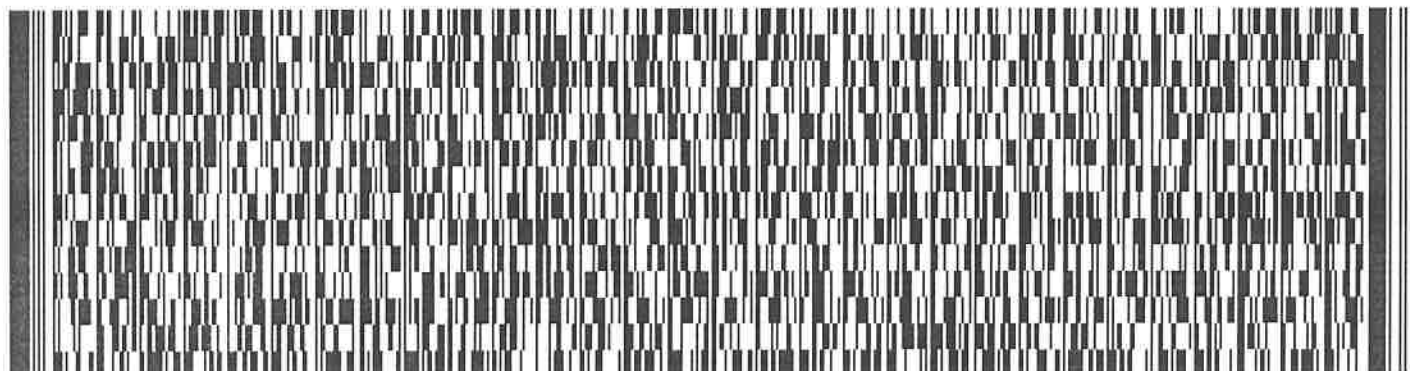
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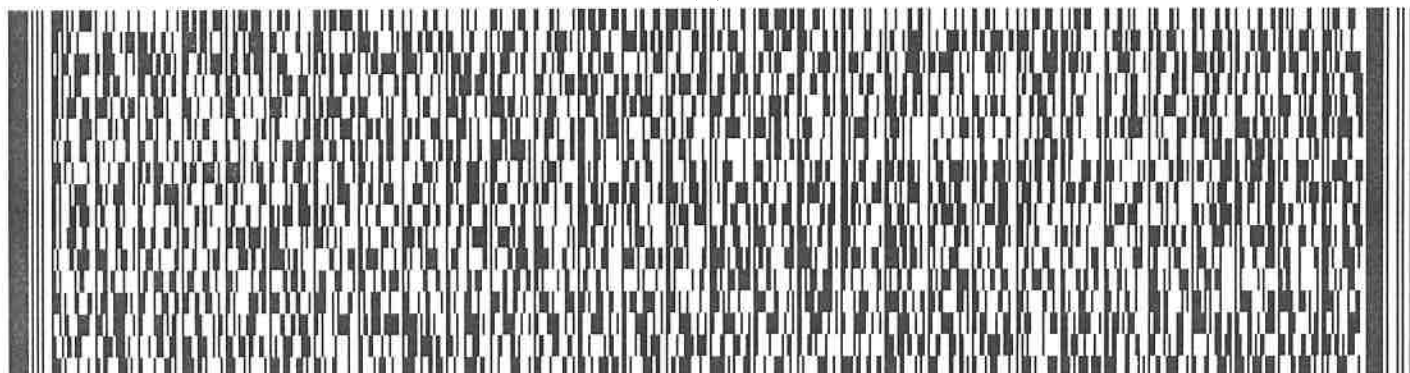
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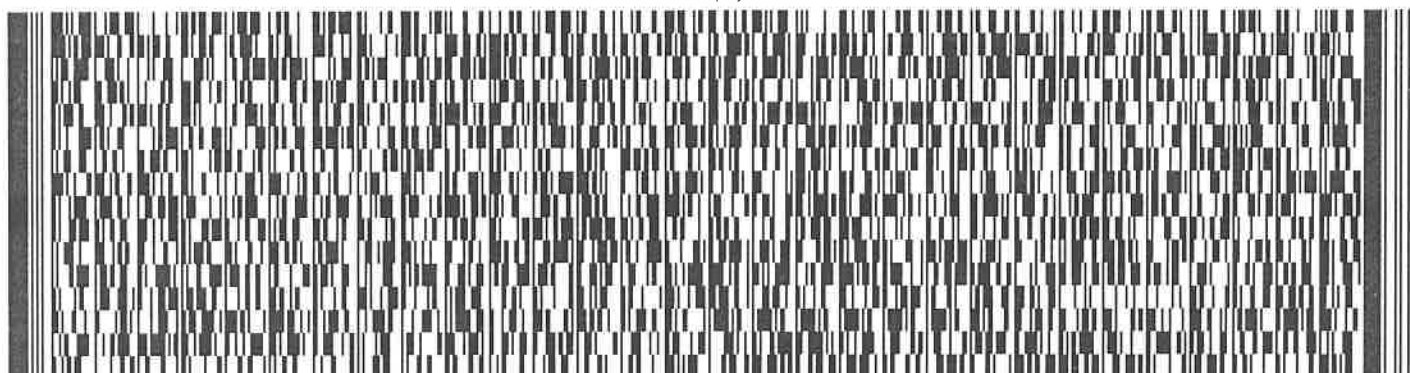
Bankruptcy1to50



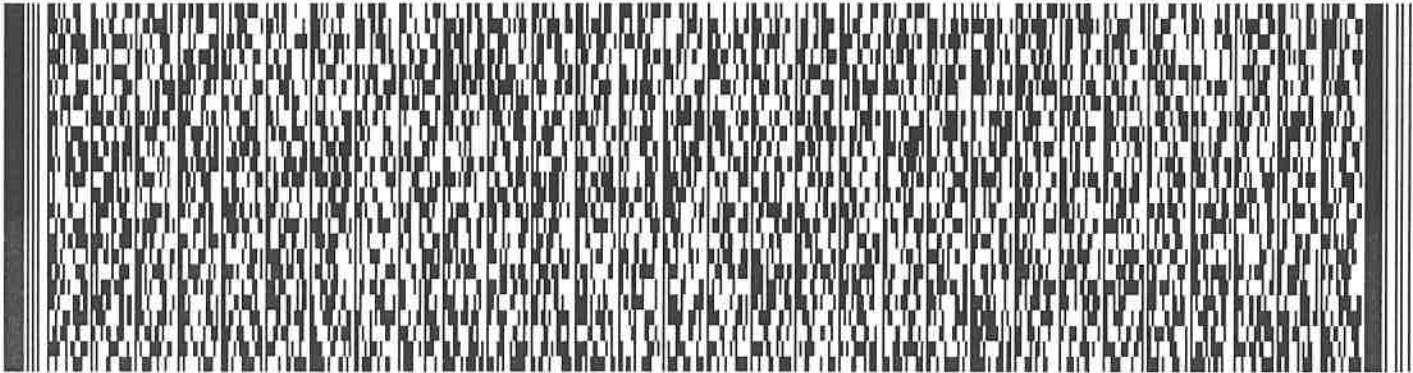
Bankruptcy51to100



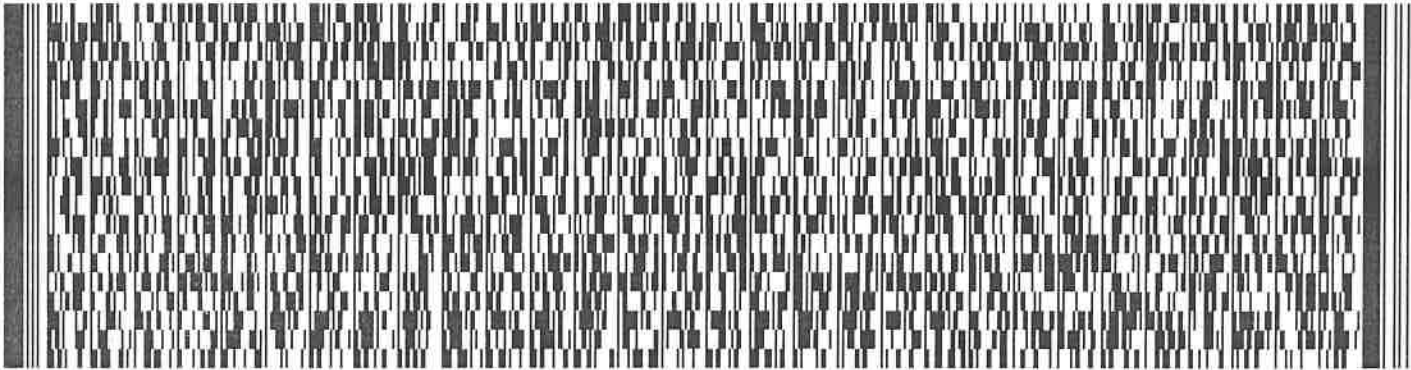
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NonBankruptcy51to100



PageThree



PageFour

Joseph Klaynberg
Part 1 Cash Receipts & Disbursements

Backup Schedule

	MCB 0346	MCB 2551	MCB 2543	Total	Notes	Prior month cumulative	Current month cumulative
Cash balance beginning of month	\$ 6,302.72	\$ 447,625.71	\$ 1,620.97	\$ 455,549.40			
Partnership Distributions		\$ 1,802.88			114 MS Member LLC		
Partnership Distributions		\$ 600.00			KS Equities LLC		
Partnership Distributions		\$ 700.00			AM Club LLC		
SSA Income			\$ 2,937.10				
Total receipts	\$ -	\$ 3,102.88	\$ 2,937.10	\$ 6,039.98		\$ 39,836.64	\$ 45,876.62
Verzon	\$ (6.54)						
Verzon	\$ (387.30)						
Empire Blue	\$ (335.83)						
Spectrum		\$ (476.64)					
American Express		\$ (1,898.85)					
Total disbursements	\$ (729.67)	\$ (2,375.49)	\$ -	\$ (3,105.16)		\$ (16,356.42)	\$ (19,461.58)
Transfer				\$ -			
Cash balance end of month	\$ 5,573.05	\$ 448,353.10	\$ 4,558.07	\$ 458,484.22			
Disbursements made by third party				\$ 3,900.00	Rent	\$ 7,500.00	\$ 11,400.00
Total disbursements for fee calc				\$ 7,005.16			\$ 30,861.58

Part V
Schedule of Payments to Professionals

Name of professional	Role	Date of retention	Amount of any retainers	Amount of any compensation and expenses approved by the court	Amount of retainer applied to pay the compensation and expenses	Amounts paid by the estate for the compensation and expenses over and above retainers applied
Cullen and Dykman LLP	Debtor's Counsel	3/7/2022	\$ 19,584.50	\$ -	\$ 19,584.50	\$ 4,576.34
Thaler Law Firm	Special Counsel	3/7/2022	\$ 17,705.00	\$ -	\$ 8,194.00	\$ -
Lehman Flynn Vollaro NY CPA's PLLC	Debtor's Accountants	2/7/2022	\$ -	\$ -	\$ -	\$ 1,695.00

99 Park Avenue, 12th Floor
New York, NY 10016

RETURN SERVICE REQUESTED

JOSEPH KLAYNBERG PRIMARY
FBO EDWARD KLAYNBERG BENE
114 MULBERRY ST
NEW YORK NY 10013-5191


Statement Ending 05/31/2022

JOSEPH KLAYNBERG PRIMARY

Page 1 of 2

Statement Number: XXXXXXXX0346

Managing Your Accounts

	Banking Center	Park Avenue Banking Center
	Banking Center	212-365-6700
	Mailing Address	99 Park Avenue New York, NY 10016
	Online Banking	www.MCBankNY.com

Summary of Accounts

Account Type	Account Number	Ending Balance
PERSONAL CHECKING	XXXXXXXX0346	\$5,573.05

PERSONAL CHECKING-XXXXXXXX0346

Account Summary

Date	Description	Amount
04/30/2022	Beginning Balance	\$6,302.72
	0 Credit(s) This Period	\$0.00
	3 Debit(s) This Period	-\$729.67
05/31/2022	Ending Balance	\$5,573.05

Account Activity

Post Date	Description	Debits	Credits	Balance
04/30/2022	Beginning Balance			\$6,302.72
05/02/2022	VzOnDemand VZ BillPay WEB	\$6.54		\$6,296.18
05/04/2022	VERIZON PAYMENTREC URRING TEL	\$387.30		\$5,908.88
05/06/2022	EMPIRE BLUE MED SUPP 220505 WEB	\$335.83		\$5,573.05
05/31/2022	Ending Balance			\$5,573.05

Daily Balances

Date	Amount	Date	Amount	Date	Amount
05/02/2022	\$6,296.18	05/04/2022	\$5,908.88	05/06/2022	\$5,573.05

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Online Banking
www.MCBankNY.com

Mobile Banking Apps



**In case of errors or questions about your account telephone us at: 212-365-6700 or
write us at: Metropolitan Commercial Bank, 99 Park Avenue, 12th Floor, New York, NY 10016**

As soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt:

1. Tell us your name and account number.
2. Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem appeared.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will recredit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

AN EASY GUIDE FOR BALANCING YOUR ACCOUNT

1. Enter the last balance shown on this statement here.	\$	
2. Compare the deposits and additions shown on this statement with your records. If a recent deposit does not show on this statement, enter the amount(s) here.	\$	
3. Total of lines 1 & 2.	\$	
4. Enter the total from the checks/withdrawals in Section 4a .	\$	
5. Subtract line 4 from line 3. This should be your present balance.	\$	

USE THIS AREA FOR YOUR COMPUTATIONS

4a. List the checks / withdrawals which have been written or made, but have not been charged to your account.

CHECKS/WITHDRAWALS	AMOUNT		CHECKS/WITHDRAWALS	AMOUNT	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	

TOTAL to be entered in **Section 4** above.

\$

99 Park Avenue, 12th Floor
New York, NY 10016

RETURN SERVICE REQUESTED

JOSEPH KLAYNBERG
DIP CASE NO 22-10165 MG
114 MULBERRY ST APT 703
NEW YORK NY 10013-5279

Statement Ending 05/31/2022

JOSEPH KLAYNBERG

Page 1 of 2

Statement Number: XXXXXXXX2543

Managing Your Accounts

	Banking Center	Park Avenue Banking Center
	Banking Center	212-365-6700
	Mailing Address	99 Park Avenue New York, NY 10016
	Online Banking	www.MCBankNY.com

Summary of Accounts

Account Type	Account Number	Ending Balance
SSI DIP ACCOUNT	XXXXXXXXX2543	\$4,558.07

SSI DIP ACCOUNT-XXXXXXXXX2543

Account Summary

Date	Description	Amount
04/30/2022	Beginning Balance	\$1,620.97
	1 Credit(s) This Period	\$2,937.10
	0 Debit(s) This Period	\$0.00
05/31/2022	Ending Balance	\$4,558.07

Account Activity

Post Date	Description	Debits	Credits	Balance
04/30/2022	Beginning Balance			\$1,620.97
05/11/2022	SSA TREAS 310 XXSOC SEC 051122 PPD		\$2,937.10	\$4,558.07
	SSA			
05/31/2022	Ending Balance			\$4,558.07

Daily Balances

Date	Amount
05/11/2022	\$4,558.07

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Online Banking
www.MCBankNY.com

Mobile Banking Apps



In case of errors or questions about your account telephone us at: 212-365-6700 or write us at: Metropolitan Commercial Bank, 99 Park Avenue, 12th Floor, New York, NY 10016

As soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt:

1. Tell us your name and account number.
2. Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

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We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will recredit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

AN EASY GUIDE FOR BALANCING YOUR ACCOUNT

1. Enter the last balance shown on this statement here.	\$	
2. Compare the deposits and additions shown on this statement with your records. If a recent deposit does not show on this statement, enter the amount(s) here.	\$	
3. Total of lines 1 & 2.	\$	
4. Enter the total from the checks/withdrawals in Section 4a .	\$	
5. Subtract line 4 from line 3. This should be your present balance.	\$	

USE THIS AREA FOR YOUR COMPUTATIONS

4a. List the checks / withdrawals which have been written or made, but have not been charged to your account.

CHECKS/WITHDRAWALS	AMOUNT		CHECKS/WITHDRAWALS	AMOUNT	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
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	\$			\$	
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	\$			\$	
	\$			\$	
	\$			\$	

TOTAL to be entered in **Section 4** above.

\$

99 Park Avenue, 12th Floor
New York, NY 10016

RETURN SERVICE REQUESTED

JOSEPH KLAYNBERG
DIP CASE NO 22-10165 MG
114 MULBERRY ST APT 703
NEW YORK NY 10013-5279

Statement Ending 05/31/2022

JOSEPH KLAYNBERG

Page 1 of 2

Statement Number: XXXXXXXX2551

Managing Your Accounts

	Banking Center	Park Avenue Banking Center
	Banking Center	212-365-6700
	Mailing Address	99 Park Avenue New York, NY 10016
	Online Banking	www.MCBankNY.com

Summary of Accounts

Account Type	Account Number	Ending Balance
DEBTOR IN POSSESSION ACCT	XXXXXXXXX2551	\$448,353.10

DEBTOR IN POSSESSION ACCT-XXXXXXXXX2551

Account Summary

Date	Description	Amount
04/30/2022	Beginning Balance	\$447,625.71
	1 Credit(s) This Period	\$3,102.88
	2 Debit(s) This Period	-\$2,375.49
05/31/2022	Ending Balance	\$448,353.10

Account Activity

Post Date	Description	Debits	Credits	Balance
04/30/2022	Beginning Balance			\$447,625.71
05/04/2022	DEPOSIT METROPOLITAN CO		\$3,102.88	\$450,728.59
05/11/2022	SPECTRUM SPECTRUM 220510 WEB	\$476.64		\$450,251.95
05/27/2022	AMEX EPAYMENT ACH PMT 220527 WEB	\$1,898.85		\$448,353.10
05/31/2022	Ending Balance			\$448,353.10

Daily Balances

Date	Amount	Date	Amount	Date	Amount
05/04/2022	\$450,728.59	05/11/2022	\$450,251.95	05/27/2022	\$448,353.10

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Online Banking
www.MCBankNY.com

Mobile Banking Apps



In case of errors or questions about your account telephone us at: 212-365-6700 or write us at: Metropolitan Commercial Bank, 99 Park Avenue, 12th Floor, New York, NY 10016

As soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt:

1. Tell us your name and account number.
2. Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem appeared.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will recredit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

AN EASY GUIDE FOR BALANCING YOUR ACCOUNT

1. Enter the last balance shown on this statement here.	\$	
2. Compare the deposits and additions shown on this statement with your records. If a recent deposit does not show on this statement, enter the amount(s) here.	\$	
3. Total of lines 1 & 2.	\$	
4. Enter the total from the checks/withdrawals in Section 4a .	\$	
5. Subtract line 4 from line 3. This should be your present balance.	\$	

USE THIS AREA FOR YOUR COMPUTATIONS

4a. List the checks / withdrawals which have been written or made, but have not been charged to your account.

CHECKS/WITHDRAWALS	AMOUNT		CHECKS/WITHDRAWALS	AMOUNT	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	

TOTAL to be entered in **Section 4** above.

\$